

Theories of aging

Science



For this part of the assignment I am going to be describing two theories of ageing. Firstly I will be describing the Disengagement theory and then the Activity theory. I will then be comparing the similarities and differences between the two, and also writing up two case studies of older people and explain the development that occurs in older life, relating back to the theories I will have discussed. Firstly the theory of Social Disengagement, disengagement means a person's withdrawal from involvement with anything.

The theory was first put forward by two authors Cumming and Henry in 1961 who believed that it was natural for the elderly to withdraw from social involvement with others, due to having restricted opportunities to interact with other people. There are many issues that limit social interaction which results in disengagement. Some of these may be things like retirement, illhealth, mobility, travel or technology.

The theory of disengagement was widely accepted as other theorists such as Bromley (1974) agreed with the theory arguing that “ although some individuals fight the process all the way, disengagement of some sort is bound to come, simply because old people have neither the physical nor the mental resources they had when they were young. ” Secondly the Activity theory, this theory argues that older people need to stay mentally and socially active to limit the risks of disengagement.

Being active in older life can help people to overcome many of the problems and issues they will have to endure throughout the older lifestage. Being active can include taking part in sports and activities, joining clubs and

groups to go on trips, outings, holidays and even simple things like continuing with hobbies such as gardening or walking the dog. Being active is very important for many reasons when a person is in the later years of life. It is believed that it's not enough to simply provide facilities for older people they must be educated to make use of them and encouraged to abandon fixed habits.

The main argument for the activity theory is that disengagement can ultimately result in loss of physical and mental skills due to lack of practice. My first case study is of a man named Howard Lane, he died aged 75 years old and had been diagnosed with Alzheimer's 9 years earlier. Over the 9 years his condition seriously deteriorated. Howard had had a very active life with various jobs such as a Clerk of Works at Par Docks, a mental nurse and other physically demanding roles. He had been married for 52 years and had two grown up children, a daughter Jennie who had two children and a son Richard who had four children.

Howard was a very involved grandparent throughout the whole of his grandchildren's lives until his condition deteriorated so badly he couldn't even tell who they were anymore. As Howard reached retirement he remained a very engaged active person despite the label he was now given as being 'old.' He very much fitted the role within the activity theory, regularly exercising, seeing his family, keeping in contact with them in a number of ways. He and his wife had a particular passion for ballroom dancing... they had won competitions!

He had a very healthy appetite, and had never smoked or drank at all throughout his life. Although Howard had always been healthy and had no previous health issues and had stayed active throughout his final lifestage he still developed the disease Alzheimer's. As the illness progressed Howard gradually changed as a person. He became forgetful, got confused easily, and as he began to seriously deteriorate he became violent at times, physically incapable of doing things for himself, he would forget things that had happened and who people were.

Further into his illness Howard became more and more disengaged. His whole life had changed due to the process of ageing along with the unfortunate illness he had. Not only had the disengagement affected Howard as a person it was also affecting a lot around him. Firstly the most obvious effect it was having was on Howard's family. They began to be constantly worry about him therefore would be constantly in contact asking him if he was ok. It also put a large amount of stress on his wife Vera, and because she was in her older age as well she found it very hard to deal with the stress she was under.

By the time Howard was the age of 71 Vera had no other option but to put Howard in a nursing home so he could receive the care that he needed. Due to Howard's illness Vera had now become disengaged, she had spent all of her time looking after her husband, worrying about him and visiting him constantly. Another major factor that affected Vera's stress was the fees she had to pay at the nursing home. She was very worried about the scale of the costs and was worried about having to sell her home.

She had gradually lost contact with her friends and had no time for any personal hobbies or even time to properly look after herself and because of this Vera had become stressed and run down and was finding caring for Howard very hard to cope with. Her biggest worry and fear constantly being how she would cope with it if Howard died. Bereavement is usually hard to cope with for the elderly especially disengaged people, they are likely to feel more isolated and alone and this is what Vera was frightened of. In actual fact Vera died suddenly in December 2003, shortly followed by Howard June 2004.

By this time Howard had no understanding of anyone around him as he had little response to anything, therefore he did not grieve for his wife as he didn't even understand that she was gone. Their family described it as a blessing because in this way Vera never had to cope with the bereavement of losing her partner and neither did he. Overall retirement did have a positive effect on Vera and Howard to begin with. They had more freedom to be active, pursue their hobbies, spend time together, and with their loved ones.

However old age brought ill health which caused Vera and Howard to disengage and become isolated from others which continued to bring ill health and stress. My second case study is about a woman named Ruth Cohen. Ruth Cohen is an 84 year old woman, she had previously been a teacher for nearly 40 years. Ruth has one son of 60 who has two daughters Lisa and Issie, Lisa has a son of 17. Ruth is a very old woman and has a number of health problems including arthritis, high blood pressure, and sight and hearing problems.

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However Ruth has lead a very healthy and active retirement. Since Ruth has retired she has done voluntary work for a number of charities and her local church as she is a very religious woman. Even in her late 70's Ruth attends church every Sunday and helped to run the local Sunday school. She regularly met her friends from church to go out for tea. She tries to visit her children and grandchild as much as she can however due to her eyesight she cannot drive anymore so her only way of seeing them is to get the bus.

In her old age, Ruth despite still being so active has become quite frail and is frightened easily therefore tries to avoid going to places with people she doesn't know, she tends to stay in her own village, go to the same shops and see the same people every day. Ruth was married for 60 years to James, unfortunately 14 years ago James passed away due to a heart attack. Ruth obviously had a hard time with the loss of her husband of 60 years however because of the lifestyle Ruth led she managed to carry on with her life and avoided becoming disengaged and easily accepted the support and help of ther whereas a lot of people cannot do so so easily. Because of Ruth's personality and the way she was her family didn't feel like they had to constantly worry about her and they knew she would be getting on fine without their constant care. However Ruth is getting rather old now so they do visit more frequently and her granddaughter Issie bought her a dog to keep her company and occupied. As Ruth entered her 80's the physical ageing process could no longer be avoided and began to take over her life.

She became very weak and could only walk with a Zimmer frame, she became increasingly isolated in her home due to mobility issues and although people did visit she began to feel lonely and depressed. This case <https://assignbuster.com/theories-of-aging-research-paper-samples/>

study is perfect evidence of the disengagement theory. Although Ruth remained active and dealt with the bereavement she endured and her health issues it was inevitable that age caught up on her, she lead a fulfilling retirement and kept up all of her routines and hobbies as long as she physically could but eventually her mobility limited her life and effected her emotionally as well as physically.